		NDIDATE / OFFICEHOLI INANCE REPORT	DER 6965	FORM JC/OH COVER SHEET PG 1
Tł	ne JC/OH Instruction Gu	UIDE explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers) 00062281	2 PAGE # 1 of 34
3	CANDIDATE / OFFICEHOLDER	ms/mrs/mr first Mrs. Melissa	MI	OFFICE USE ONLY
	NAME	NICKNAME LAST Goodwin	SUFFIX	Date Received School College
4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS/PO BOX: APT / SUITE #; 401 W. 15th Street, Suite 850 Austin, TX 78701	CITY; STATE; ZIP CODE	Date Hand-delivered of Date Postmacked
				Receipt # Amount
5	CAMPAIGN TREASURER	Mrs. First Donna	MI	Date Processed
	NAME	NICKNAME LAST Garcia Davidson	SUFFIX	Date Imaged
6	CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SU 401 W. 15th St., Suite 850 Austin, TX 78701	ITE#; CITY; STATE;	ZIP CODE
7	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 469-7474	EXTENSION	
8	REPORT TYPE	January 15 X 30th day before elect		15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)
9	PERIOD COVERED	Month Day Year THRC 07/01/2008	Month Day DUGH 10/04/20	Year
10	ELECTION	Month Day Year ELECTION TY 11/04/2008 ELECTION TY		General Special
11	OFFICE	OFFICE HELD (if any) District Judge District 427	12 OFFICE SOUGHT (if known District Judge District) ct 427
13	NOTICE OF DIRECT CAMPAIGN EXPENDITURE	Direct campaign expenditures are campaign ex Candidates are required to disclose this information		
	BY OTHER INDIVIDUALS	Name .		
		Address/PO Box; Apt. / Suite #; City; State;	Zip Code	
	additional pages			
		GO ТО	PAGE 2	

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

			——————————————————————————————————————
14 C/OH NAME Good	dwin, Melissa (Mrs.		15 ACCOUNT # (Ethics Commission filers)
16 NOTICE FROM	have been made wit	obtice of political expenditures by political committees to support the nout the candidate's or officeholder's knowledge or consent. Cand by receive notice of such expenditures	
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL	COMMITTEE ADDRESS	
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 575.83
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 28,290.04
EXPENDITURE TOTALS	3. TOTAL	POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZ	\$ 48.9
	4. TOTAL	POLITICAL EXPENDITURES	\$ 7,682.3
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE AY OF THE REPORTING PERIOD	\$ 24,463.9
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE REPORTING PERIOD	\$ 0.00
Sworn to and subscrib	~ ^	is true and correct and include me under Title 15, Election Constant Signature of the state of t	poche
Signature of officer admi	inistering oath	Print name of officer administering oath	Title of officer administering oath

The Instruction	ON GUIDE explains how to complete this form.	1 PAGE # Schedule: 1/2	29 Report: 3/34			
2 FILER NAME	Goodwin, Melissa (Mrs.)		3 ACCOUNT# (Ethics Commission filers)		
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
09/17/2008	6 Contributor address; City; State; Zip Code 1646 Jerusalem Dr. Round Rock, TX 78664		\$50.00			
9 Contributor's pattorney	principal occupation	10 Contributor's job Local Governn	<u> </u>	Texas, complete Schedule T)		
11 Contributor's e State of Tex	employer / law firm as	12 Law firm of conti	ributor's spouse (if ar	ny)		
13 If contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
09/11/2008	Contributor address; City; State; Zip Code 809 Bushmills Court Pflugerville, TX 78660		\$50.00	1 1 1		
	Fillugerville, 1X 76000		(If travel outside of	Texas, complete Schedule T)		
Contributor's p	principal occupation r	Contributor's job Administrator	title			
Contributor's e Potts & Reilly	employer / law firm y, LLP	Law firm of conti	ributor's spouse (if ar	ny)		
If contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
09/08/2008	Contributor address; City; State; Zip Code 4013 Manchaca Rd., No. 36 Austin, TX 78704		\$50.00	 		
l	•		(If travel outside of	Texas, complete Schedule T)		
Contributor's principal occupation Program Administor		Contributor's job title Program Administrator				
Contributor's e	employer / law firm	Law firm of conti	ributor's spouse (if ar	ny)		
If contributor is	If contributor is a child, law firm of parent(s) (if any)					

Texas Ethics Commission

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

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The Instruction	ON GUIDE explains how to complete this form.			1 PAGE#		
I II I I I I I I I I I I I I I I I I I	JN Guide explains now to complete and form.			Schedule: 2/2	9 Report: 4/34	
2 FILER NAME	Goodwin, Melissa (Mrs.)			3 ACCOUNT# (Ethics Commission filers)	
				00062281		
4 Date	5 Full name of contributor uut-of-state PAC (ID# Barlow, Anne			7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
09/17/2008	6 Contributor address; City; State; Zip Code 14418 Fitzhugh Rd. Austin, TX 78736			\$50.00	 	
				(If travel outside of	Texas, complete Schedule T)	
9 Contributor's p Dog breeder	principal occupation	10	Contributor's job Dog breeder	title		
11 Contributor's e self	employer / law firm	12	Law firm of contr	ributor's spouse (if ar	ıy)	
13 If contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
09/08/2008	Contributor address; City; State; Zip Code 1145 West 5th St., Suite 201 Austin, TX 78703			\$50.00	 	
				(If travel outside of	Texas, complete Schedule T)	
Contributor's p Attorney	principal occupation		Contributor's job Attorney	title		
Contributor's e self	employer / law firm		Law firm of contributor's spouse (if any)			
If contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
09/06/2008	Contributor address; City; State; Zip Code 6836 Bee Caves, #259 Austin, TX 78746			\$100.00	 	
	Austri, 17/0/40			(If travel outside of	Texas, complete Schedule T)	
Contributor's p Attorney	principal occupation		Contributor's job Attorney	,		
Contributor's e Harren Intere	employer / law firm ests		Law firm of contr	ributor's spouse (if ar)у)	
If contributor is	s a child, law firm of parent(s) (if any)					

OTTLE	THAN PLEDGES ON LOA		יטוטטוני	IAL)	
The Instruction	ON GUIDE explains how to complete this form.			1 PAGE # Schedule: 3/2	9 Report: 5/34
2 FILER NAME	Goodwin, Melissa (Mrs.)				Ethics Commission filers)
4 Date	5 Full name of contributor out-of-state PAC (ID# Browning, Bill	<i>#</i> _)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/17/2008	6 Contributor address; City; State; Zip Code 1200 Barton Hills Austin, TX 78704			\$500.00	
				(If travel outside of	Texas, complete Schedule T)
9 Contributor's pattorney	orincipal occupation	10	Contributor's job Attorney	title	
11 Contributor's e	employer / law firm	12	Law firm of contr	ibutor's spouse (if an	y)
13 If contributor is a child, law firm of parent(s) (if any)					
Date	Full name of contributor	<u></u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/21/2008	Contributor address; City; State; Zip Code 610 Brazos St., Suite 660 Austin, TX 78701			\$150.00	
				(If travel outside of	Texas, complete Schedule T)
Contributor's p Attorney	orincipal occupation		Contributor's job Attorney	title	
	employer / law firm ce of Frank Bryan		Law firm of contributor's spouse (if any)		
If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/08/2008	Contributor address; City; State; Zip Code 11217 Native Texan Trail Austin, TX 78735			\$100.00	
i				(If travel outside of	Texas, complete Schedule T)
Contributor's p	rincipal occupation	-	Contributor's job retired	<u> </u>	
Contributor's e retired	mployer / law firm		Law firm of contr	ibutor's spouse (if an	y)
If contributor is	a child, law firm of parent(s) (if any)				

SCHEDULE A (J)

1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

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The Instruction	ON GUIDE explains how to complete this form.			1 PAGE#	
				Schedule: 4/2	29 Report: 6/34
2 FILER NAME	Goodwin, Melissa (Mrs.)			3 ACCOUNT# ((Ethics Commission filers)
				00062281	
4 Date	5 Full name of contributor	<i>‡</i>)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
08/30/2008	6 Contributor address; City; State; Zip Code 3301 Northland Dr., Suite 215			\$500.00	
	Austin, TX 78731				'
			···	(If travel outside of	Texas, complete Schedule T)
9 Contributor's pattorney	principal occupation	10	Contributor's job attorney	title	
11 Contributor's	employer / law firm	12	Law firm of conti	ributor's spouse (if a	ny)
l self					
13 If contributor is	s a child, law firm of parent(s) (if any)	<u> </u>			
Date	Full name of contributor)	Amount of	In-kind contribution
20.0	Cano, Juan		/	contribution (\$)	description (if applicable)
	.				I
09/17/2008	Contributor address; City; State; Zip Code			\$500.00	1
	9808 Derecho Bend Austin TX 78737 Austin, TX 78737				1
	Addan, TXTOTOT			(If travel outside of	Texas, complete Schedule T)
Contributor's p Attorney	principal occupation		Contributor's job Attorney	title	
Contributor's e self	employer / law firm		Law firm of contributor's spouse (if any)		
If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/01/2008	Contributor address; City; State; Zip Code 5400 Rayburn Lane			\$100.00	
	Austin, TX 78723				
	·			(If travel outside of	Texas, complete Schedule T)
Contributor's p	principal occupation		Contributor's job	title	
<u>-</u>			-		
	employer / law firm f Antonio Wehnes		Law firm of conti	ributor's spouse (if a	ny)
If contributor is	s a child, law firm of parent(s) (if any)				
	•				

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The Instruction	ON GUIDE explains how to complete this form.	1 PAGE # Schedule: 5/2	1 PAGE # Schedule: 5/29 Report: 7/34			
2 FILER NAME	TILER NAME Goodwin, Melissa (Mrs.)			3 ACCOUNT # (Ethics Commission filers)		
Z TILLIVIO WIL	Total Coodwin, Monoca (Mile.)			• •		
	,		00062281			
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Denman, Charles	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
09/25/2008	6 Contributor address; City; State; Zip Code 8317-106 Club Ridge Dr.		\$100.00	 		
	Austin, TX 78735		(If travel outside of	Texas, complete Schedule T)		
9 Contributor's p Retired	orincipal occupation	10 Contributor's job Retired	title			
11 Contributor's e Retired	employer / law firm	12 Law firm of contr	ributor's spouse (if ar	ny)		
13 If contributor is a child, law firm of parent(s) (if any)						
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
08/29/2008	Contributor address; City; State; Zip Code 603 W. 12th St.		\$1,500.00] 		
	Austin, TX 78701	,		ı		
			(If travel outside of	Texas, complete Schedule T)		
Contributor's p Attorney	rincipal occupation	Contributor's job Attorney	o title			
	employer / law firm ndt & Associates	Law firm of contr	stributor's spouse (if any)			
If contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor	£ \	Amount of	In-kind contribution		
Date	Dos Santos-Dierking, Sheila	·/	contribution (\$)	description (if applicable)		
09/18/2008	Contributor address; City; State; Zip Code 9101 Caira Cove		\$100.00) 		
	Austin, TX 78750		(If travel outside of	Texas, complete Schedule T)		
, , , , , , , , , , , , , , , , , , ,		•	Contributor's job title Office Manager			
Contributor's e UTSA	employer / law firm	Law firm of contr	ributor's spouse (if ar	ny)		
If contributor is a child, law firm of parent(s) (if any)						

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The Interpretation	ON GUIDE explains how to complete this form.			1 PAGE#	
Ifle I Natikuciii	ON Guise explains now to complete this form.		·	Schedule: 6/2	9 Report: 8/34
2 FILER NAME	Goodwin, Melissa (Mrs.)				Ethics Commission filers)
				00062281	
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/04/2008	6 Contributor address; City; State; Zip Code 6528 Heron Drive Austin, TX 78759			\$50.00	
				(If travel outside of	Texas, complete Schedule T)
9 Contributor's Chair	principal occupation	10	Contributor's job Chair	title	
11 Contributor's of TCRP	employer / law firm	12	Law firm of contr	ributor's spouse (if ar	y)
13 If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	<i>‡</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/17/2008	Contributor address; City; State; Zip Code 10703 Arikara River Dr.			\$50.00	 -
	Austin, TX 78748	•		<u></u>	Texas, complete Schedule T)
Contributor's p Attorney	orincipal occupation		Contributor's job Attorney	title	
Contributor's e State of Texa	employer / law firm as	Law firm of contributor's spouse (if any)			
If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	<i>‡</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/17/2008	Contributor address; City; State; Zip Code 2222 Mockingbird Dr. Round Rock, TX 78681			\$500.00	
	Round Rock, 12 70001			(If travel outside of	Texas, complete Schedule T)
Contributor's n	rincipal occupation		Contributor's job	<u> </u>	- constitution of the control of the
attorney	This part occupation		attorney		
Contributor's e Self	mployer / law firm		Law firm of contr	ributor's spouse (if ar	ny)
If contributor is	a child, law firm of parent(s) (if any)				

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The Lucyana	Curs avalaine hourte complete this form			1 PAGE#	
THE INSTRUCTION	ON GUIDE explains how to complete this form.			Schedule: 7/2	29 Report: 9/34
2 FILER NAME	Goodwin, Melissa (Mrs.)			3 ACCOUNT# ((Ethics Commission filers)
				00062281	
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Finney, Jerald	ŧ)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/17/2008	6 Contributor address; City; State; Zip Code P.O. Box 1346 Austin, TX 78767			\$100.00	
					Texas, complete Schedule T)
9 Contributor's attorney	principal occupation	10	Contributor's job attorney	title	
11 Contributor's e	employer / law firm	12	Law firm of contr	ributor's spouse (if a	ny)
13 If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	<u> </u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/02/2008	Contributor address; City; State; Zip Code 8006 El Dorado Dr. Austin, TX 78737			\$50.00	1
				(If travel outside of	Texas, complete Schedule T)
Contributor's pretired	principal occupation		Contributor's job n/a	title	
Contributor's e retired	employer / law firm		Law firm of conti	ributor's spouse (if a	ny)
If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	ļ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/18/2008	Contributor address; City; State; Zip Code 404 W. 13th St. Austin, TX 78701			\$100.00	'
			•	(If travel outside of	Texas, complete Schedule T)
Contributor's p attorney	rincipal occupation		Contributor's job attorney	title	
Contributor's e self	mployer / law firm		Law firm of contr	ributor's spouse (if a	ny)
If contributor is	a child, law firm of parent(s) (if any)				

<u> </u>				··· · - ·		
71				1 PAGE#		
I ne instruction	The Instruction Guide explains how to complete this form.			Schedule: 8/2	Schedule: 8/29 Report: 10/34	
2 FILER NAME	Goodwin, Melissa (Mrs.)			3 ACCOUNT#	(Ethics Commission filers)	
				00062281		
4 Date	5 Full name of contributor ut-of-state PAC (ID: Fulton, Diane	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
09/09/2008	6 Contributor address; City; State; Zip Code 6820 Cypress Point North			\$50.00	! ! !	
	Austin, TX 78746			(if travel outside of	Texas, complete Schedule T)	
9 Contributor's p Realtor	orincipal occupation	10	Contributor's job Realtor	title		
11 Contributor's e	employer / law firm	12	Law firm of contr	ributor's spouse (if a	ny)	
13 If contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
09/18/2008	Contributor address; City; State; Zip Code 7703 Rustling Rd. Austin, TX 78731			\$100.00	! ! [
				(If travel outside of	Texas, complete Schedule T)	
Contributor's p Mom	principal occupation		Contributor's job Mom	title		
Contributor's e Stay at home	employer / law firm e mom		Law firm of contributor's spouse (if any)			
If contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor	<i>‡</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable) Lumber & supplies	
09/01/2008	Contributor address; City; State; Zip Code 9856 Weir Loop Cir. Austin, TX 78736			\$133.43		
			•	(If travel outside of	Texas, complete Schedule T)	
Contributor's p	rincipal occupation		Contributor's job Chief of Litigat			
	mployer / law firm Commission		Law firm of contr	ributor's spouse (if a	ny)	
If contributor is	If contributor is a child, law firm of parent(s) (if any)					

			,		
The Instruction	ON GUIDE explains how to complete this form.			1 PAGE # Schedule: 9/2	29 Report: 11/34
2 FILER NAME	Goodwin, Melissa (Mrs.)			3 ACCOUNT# ((Ethics Commission filers)
4 Date 09/21/2008	5 Full name of contributor	# <u></u>		7 Amount of contribution (\$) \$261.67	8 In-kind contribution description (if applicable) lumber & sign materials
9 Contributor's p	I principal occupation	10	Contributor's job Chief of Litigat	title	, 1
	employer / law firm Commission	12	Law firm of contr	ributor's spouse (if a	ny)
13 If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable) Sign materials
10/02/2008	Contributor address; City; State; Zip Code 9856 Weir Loop Cir. Austin, TX 78736			\$337.12	
				(If travel outside of	Texas, complete Schedule T)
Contributor's p Attorney	principal occupation		Contributor's job Chief of Litigati		
	employer / law firm Commission		Law firm of contributor's spouse (if any)		
If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/08/2008	Contributor address; City; State; Zip Code 4603 Merion Cricket Dr. Austin, TX 78747	• • •		\$250.00	Texas, complete Schedule T)
Contributor's p Attorney	principal occupation		Contributor's job Attorney	title	
Contributor's e Texas Legisl	mployer / law firm ature		Law firm of contr	ributor's spouse (if a	ny)
If contributor is	a child, law firm of parent(s) (if any)				

SCHEDULE A (J)

1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

OTTIER	THAN PLEDGES OR LOA	143 (30DIC	IAL)	
The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 10/	29 Report: 12/34
2 FILER NAME	Goodwin, Melissa (Mrs.)		3 ACCOUNT # (I	Ethics Commission filers)
4 Date	5 Full name of contributor	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/17/2008	6 Contributor address; City; State; Zip Code 4501 Hennig Dr. Austin, TX 78738		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
9 Contributor's p Mathmeticia	orincipal occupation n/Engineer	10 Contributor's job	title	
11 Contributor's e self	employer / law firm	12 Law firm of contr	ributor's spouse (if ar	ny)
13 If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable) Beverages, flowers, food
09/17/2008	Contributor address; City; State; Zip Code 4501 Hennig Dr. Austin, TX 78738		\$1,000.00	i service
	/ddin, ///o/oo		(If travel outside of	Texas, complete Schedule T)
Contributor's p Mathmeticiar	rincipal occupation n/Engineer	Contributor's job -	title	
Contributor's e self	mployer / law firm	Law firm of contributor's spouse (if any)		
If contributor is	a child, law firm of parent(s) (if any)			
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/22/2008	Contributor address; City; State; Zip Code 605 West. 10th Street		\$1,000.00	
	Austin, TX 78701		(If travel outside of	Texas, complete Schedule T)
Contributor's p	rincipal occupation	Contributor's job	<u> </u>	
Contributor's principal occupation Property Manager		Property Manager		
Contributor's e Granger Prop	mployer / law firm perties	Law firm of contr	ributor's spouse (if an	y)
If contributor is	a child, law firm of parent(s) (if any)			

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The Instructi	ON GUIDE explains how to complete this form.			1 PAGE#	
THE HIGHEST	ON CORP EXPLANTS HOW TO COMPLETE WHILE TO MAIN			Schedule: 11	/29 Report: 13/34
2 FILER NAME	Goodwin, Melissa (Mrs.)			3 ACCOUNT#	(Ethics Commission filers)
				00062281	
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/08/2008	6 Contributor address; City; State; Zip Code 806 W. 11th St. Austin, TX 78701			\$250.00	
				L	Texas, complete Schedule T)
9 Contributor's attorney	principal occupation	10	Contributor's job attorney	title	
11 Contributor's of Self	employer / law firm	12	Law firm of cont	ributor's spouse (if a	ny)
13 If contributor i	s a child, law firm of parent(s) (if any)	<u> </u>			
Date	Full name of contributor ut-of-state PAC (ID:)	Amount of	In-kind contribution
	Hill Country R. W. PAC			contribution (\$)	description (if applicable)
40/04/0000				\$050.00	1
10/04/2008	Contributor address; City; State; Zip Code 12619 Fitzhugh Rd.			\$850.00	1
	Austin, TX 78736				1
				(If travel outside of	Texas, complete Schedule T)
Contributor's p	orincipal occupation		Contributor's job	title	
Contributor's	employer / law firm		Law firm of conti	ributor's spouse (if a	ny)
If contributor is	s a child, law firm of parent(s) (if any)	L		***************************************	
Date	Full name of contributor ut-of-state PAC (ID:			Amount of	In-kind contribution
Bate	Hines, Bill	,	/	contribution (\$)	description (if applicable)
09/17/2008	Contributor address; City; State; Zip Code			\$500.00	
	1307 Nueces St.				1
	Austin, TX 78701			(If travel outside of	Texas, complete Schedule T)
Contributorio	I principal occupation		Contributor's job	L	Texas, complete ochedule 1)
Attorney	omcipal occupation		Attorney	uue	
	employer / law firm		Law firm of conti	ributor's spouse (if a	ny)
Hines, Ranc	α i ioiuu				
If contributor is	s a child, law firm of parent(s) (if any)	·			

The Instructi	ON GUIDE explains how to complete this form.			1 PAGE#	
			Schedule: 12/29 Report: 14/34		
2 FILER NAME Goodwin, Melissa (Mrs.)		3 ACCOUNT# (Ethics Commission filers)		
				00062281	
4 Date	5 Full name of contributor ut-of-state PAC (ID	#)	7 Amount of	8 In-kind contribution
1	Hoffman, Richard	·	,	contribution (\$)	description (if applicable)
	,				1 1
09/17/2008	6 Contributor address; City; State; Zip Code		·	\$250.00	l 1
	500 W. 16th St., Suite 103				1
	Austin, TX 78701				i
T.				(If travel outside of	Texas, complete Schedule T)
9 Contributor's	t principal occupation	10	Contributor's job	title	
attorney		'`	attorney		
11 Contributor's	employer / law firm	12	Law firm of conti	ributor's spouse (if a	ny)
self					
40 15 17 1		<u> </u>			
13 If contributor i	s a child, law firm of parent(s) (if any)		•		
Date	Full name of contributor	#)	Amount of	In-kind contribution
Date	Jeffers, Tanisa (Ms.)	·	/	contribution (\$)	description (if applicable)
	(mei)				i
08/07/2008	Contributor address. City State. 7in Code			\$300.00	1
	Contributor address; City; State; Zip Code 1203 Baylor St.				<u> </u>
	Austin, TX 78703				
				(If travel outside of	Texas, complete Schedule T)
Contributor's	principal occupation	<u> </u>	Contributor's job	title	
Attorney			Attorney		
	employer / law firm	1	Law firm of contributor's spouse (if any)		
Bernard & A	ssociates				
If contributor is	s a child, law firm of parent(s) (if any)			•	
ii contributor is	s a crilid, law littl of parent(s) (if any)				
					•
Date	Full name of contributor ut-of-state PAC (ID:)	Amount of	In-kind contribution
	Jones, Robert		,	contribution (\$)	description (if applicable)
	,				
09/17/2008	Contributor address; City; State; Zip Code			\$100.00	, I
	13226 Dime Box Trail				
	Austin, TX 78729				(
	•			(If travel outside of	Texas, complete Schedule T)
Contributor's r	rincipal occupation		Contributor's job		
Attorney			Attorney		
	mployer / law firm		Law firm of contr	ibutor's spouse (if ar	ny)
State of Texa	as				
10 2 2 2 2		L			
It contributor is	s a child, law firm of parent(s) (if any)				

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Г	The Increment	Cups evaleing how to complete this form			1 PAGE#	
The Instruction Guide explains how to complete this form.			Schedule: 13/	Schedule: 13/29 Report: 15/34		
2 FILER NAME Goodwin, Melissa (Mrs.)			3 ACCOUNT# (Ethics Commission filers)		
					00062281	
4	Date	5 Full name of contributor	#	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	7 Amount of	8 In-kind contribution
-	54.0	keith, Barker		/	contribution (\$)	description (if applicable)
ļ		, , , , , _ , _ , _ , _ , _				!
l	09/30/2008	6 Contributor address; City; State; Zip Code			\$100.00	! !
1		P.O. Box 342348				! !
		Lakeway, TX 78734				
					(If travel outside of	Texas, complete Schedule T)
9	Contributor's p	principal occupation	10	Contributor's job	title	
	Business Ov	vner		Owner		
			40	1 - 551	7. ()	
111		employer / law firm uatics Center	12	Law firm of cont	ributor's spouse (if a	ny)
	Lakeway 7 kg	datios contor	ŀ			
13	If contributor is	s a child, law firm of parent(s) (if any)				
<u> </u>						
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
		king, Frank			CONTINUE CON	description (ii applicable)
	09/17/2008				\$100.00	
	09/11/2000	Contributor address; City; State; Zip Code			\$100.00	1
	,	5602 Shoal Edge Ct. Austin, TX 78756				
	1	·			(if travel outside of	Texas, complete Schedule T)
	Contributor's r	I principal occupation	Γ	Contributor's job	<u> </u>	
	attorney	intopa. 333apasan		Attorney		
		mployer / law firm	Law firm of contributor's spouse (if any)			
	State of Texa	as				
	If contributor is	s a child, law firm of parent(s) (if any)	L			
	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	or distinct the parent (e) (in any)				
	Date	Full name of contributor ut-of-state PAC (ID)	‡)	Amount of	In-kind contribution
		Lake Travis Republican PAC			contribution (\$)	description (if applicable) Database, mail lists, walk
	07/10/0000				00.000.00	lists
	07/19/2008	Contributor address; City; State; Zip Code			\$6,200.00	I
		107 Lakeway Hills Cv Lakeway, TX 78734				
		Lakeway, 12 70734				_
					(If travel outside of	Texas, complete Schedule T)
	Contributor's p	rincipal occupation		Contributor's job	title	
					•	
	Contributor's e	mployer / law firm		Law firm of cont	ributor's spouse (if ar	
	Sommon 5	inployor harring			o opoudo (ii ai	17)
	If contributor is	a child, law firm of parent(s) (if any)		_	_ ·· _ ·	

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The Instruction	ON GUIDE explains how to complete this form.			1 PAGE#	
			Schedule: 14/29 Report: 16/34		
2 FILER NAME	Goodwin, Melissa (Mrs.)			3 ACCOUNT# (Ethics Commission filers)
				00062281	
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
·					
08/01/2008	6 Contributor address; City; State; Zip Code			\$2,500.00	
	107 Lakeway Hills Cv Lakeway, TX 78734				1
	Zanonay, 17710701			(If travel outside of	Texas, complete Schedule T)
9 Contributor's	Drincipal occupation	10	Contributor's job	L`	Toxas, complete contentie ()
3 Contributor 3	on cipal occupation		Community 3 job	uue	
11 Contributor's	employer / law firm	12	Law firm of conti	ributor's spouse (if a	ny)
,					
13 If contributor is	s a child, law firm of parent(s) (if any)				
1					
Date	Full name of contributor ut-of-state PAC (ID:	#	<u> </u>	Amount of	In-kind contribution
54.0	Lake Travis Republican Women PAC		/	contribution (\$)	description (if applicable)
09/22/2008	Contributor address; City; State; Zip Code		.,.,,,,,	\$500.00	I
	23 Drifting Wind Run The Hills, TX 78738				1
	, , , , , , , , , , , , , , , , , , , ,			(If travel outside of	Texas, complete Schedule T)
Contributor's p	principal occupation		Contributor's job	title	
Contributor's e	employer / law firm	Law firm of contributor's spouse (if any)			
If contributor is	s a child, law firm of parent(s) (if any)				
ii contributor is	s a crilid, law little of parent(s) (ii any)		•		
					· · · · · · · · · · · · · · · · · · ·
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Larson, Bob			Contribution (\$)	description (it applicable)
09/17/2008	Operational and design of the Control 7 of Control			\$50.00	.
	Contributor address; City; State; Zip Code 5007 Parell Path			·	
	Austin, TX 78744		i		1
				(If travel outside of	Texas, complete Schedule T)
·	orincipal occupation		Contributor's job	title	
retired	•		retired		•
Contributor's e	employer / law firm		Law firm of contr	ributor's spouse (if a	ny)
retired					
If contributor is	s a child, law firm of parent(s) (if any)	l			
ii continuator is	, a omo, law min or parom(o) (n any)				

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The Instructi	ON GUIDE explains how to complete this form.			1 PAGE#	
The faction delig explains not to complete the form			Schedule: 15	/29 Report: 17/34	
2 FILER NAME	Goodwin, Melissa (Mrs.)			3 ACCOUNT# ((Ethics Commission filers)
			_	00062281	
4 Date	5 Full name of contributor	<i>‡</i>)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/08/2008	6 Contributor address; City; State; Zip Code 1717 W. 6th St., Suite 390 Austin, TX 78703			\$250.00	
0 0 1 7 1 1		40	O a della de de de de la	l	Texas, complete Schedule T)
9 Contributor's p Investments	principal occupation	10	Contributor's job Owner	title	
11 Contributor's e John Lewis (• •	12	Law firm of contr	ributor's spouse (if ai	ny)
13 If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor out-of-state PAC (ID#	<u> </u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/05/2008	Contributor address; City; State; Zip Code 19720 Boggy Ford Road Lago Vista, TX 78645			\$30.00	
				(If travel outside of	Texas, complete Schedule T)
Contributor's p	orincipal occupation		Contributor's job Retired	title	
Contributor's e Retired	employer / law firm	Law firm of contributor's spouse (if any)			
If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor ☐ out-of-state PAC (ID# Main, Jean	ř <u> </u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/17/2008	Contributor address; City; State; Zip Code 10503 Redmond Rd. Austin, TX 78739			\$100.00	1
				(If travel outside of	Texas, complete Schedule T)
Contributor's pretired	principal occupation		Contributor's job retired	title	<u> </u>
Contributor's e retired	employer / law firm		Law firm of contr	ributor's spouse (if ar	ny)
If contributor is	s a child, law firm of parent(s) (if any)				

The Instruction	ON GUIDE explains how to complete this form.	_		1 PAGE#	29 Report: 18/34
O FUED MAIS CONTRACTOR MAIS CONTRACTOR (May)					
2 FILER NAME	Goodwin, Melissa (Mrs.)			l ·	Ethics Commission filers)
				00062281	
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#	#)	7 Amount of	8 In-kind contribution
	Mallory, Lisa			contribution (\$)	description (if applicable)
09/17/2008				¢50.00	
09/1//2008 	6 Contributor address; City; State; Zip Code			\$50.00	
	12537 Canyon Glen Dr. Austin, TX 78732				
	Austin, 17,70732				
				L	Texas, complete Schedule T)
	orincipal occupation	10	Contributor's job	title	
activist			activist		
11 Contributor's e	employer / law firm	12	I aw firm of contr	ributor's spouse (if ar	
none	Anpioyo, Alam Ikini		Law mill or com.	indicio o operaco (ii di	•••
13 If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor ut-of-state PAC (ID#	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Mathias, Kathy & Mark			CONTRIBUTION (4)	(ii applicable)
09/17/2008				\$100.00	
09/1//2006	Contributor address; City; State; Zip Code			\$100.00	
	4108 Sandy Acre Lane Austin, TX 78746			1	
	Austin, 17/10/40				_
				l	Texas, complete Schedule T)
	principal occupation		Contributor's job	title	
real estate			Broker		
Contributor's e	employer / law firm		Law firm of contr	ributor's spouse (if an	
Texas Realty	•		Law min or com	ibutor o opouoo (ii ur	·9)
If contributor is	s a child, law firm of parent(s) (if any)		-		
Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	McClendon, Shannon				description (ii applicable)
00/47/0000				£400.00 l	
09/17/2008	Contributor address; City; State; Zip Code			\$100.00	
	1302 Overland Stage Road Dripping Springs, TX 78620				
	Dripping Springs, 12 76020				_
				(If travel outside of	Texas, complete Schedule T)
•	principal occupation		Contributor's job	title	
attorney			attorney		•
0			Lavy from a figure	sibtoda anguas (if an	
self	employer / law firm		Law tirm of conti	ributor's spouse (if an	ny)
3611					
If contributor is	s a child, law firm of parent(s) (if any)				
	•				

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THE INSTRUCT	on Goine explains now to complete this form.			Schedule: 17/	/29 Report: 19/34
2 FILER NAME	Goodwin, Melissa (Mrs.)			3 ACCOUNT# (Ethics Commission filers)
				00062281	
4 Date	5 Full name of contributor ut-of-state PAC (ID	#)	7 Amount of	8 In-kind contribution
į	Meacham, Richard & Tina			contribution (\$)	description (if applicable)
	l				[
09/25/2008	6 Contributor address; City; State; Zip Code			\$50.00	1
}	13437 Onion Creek Dr. Manchaca, TX 78652				
	Walterlaca, TX 70002				_
				L <u>. </u>	Texas, complete Schedule T)
	principal occupation	10	Contributor's job	title	
n/a			n/a		
11 Contributor's	employer / law firm	12	Law firm of contr	ributor's spouse (if a	ny)
Homemaker					
40 15 13 1					
13 if contributor i	s a child, law firm of parent(s) (if any)				
Ì					
Date	Full name of contributor ut-of-state PAC (ID	#)	Amount of	In-kind contribution
	Motal, Becky			contribution (\$)	description (if applicable)
	<u> </u>				
09/12/2008	Contributor address; City; State; Zip Code			\$100.00	
	2404 Kathy Cove Austin, TX 78704				1
	Austin, 17,70704				
				L <u>`</u>	Texas, complete Schedule T)
Contributor's I	principal occupation		Contributor's job Attorney . Man		
Autorney			rationary : wan	agei	•
Contributor's	employer / law firm	Law firm of contributor's spouse (if any)			
LCRA					
If contributor :	s a child, law firm of parent(s) (if any)	L			
ii contributor i	s a crilid, law lifth of parent(s) (ii any)				
Date	Full name of contributor	#)	Amount of	In-kind contribution
!	Murphy, Caroline & Michael			contribution (\$)	description (if applicable)
	.			***	
09/14/2008	Contributor address; City; State; Zip Code			\$250.00	
	4010 Lockwood Bend Ct. Bee Cave, TX 78738				
	200.0000, 17.70700				
		_		L`:-	Texas, complete Schedule T)
Contributor's p Mayor & Ald	orincipal occupation		Contributor's job Mayor & Coun		
Wayor & Ald	eman		Wayor a Court	·	, i
Contributor's	employer / law firm		Law firm of contr	ributor's spouse (if ar	ny)
Village of Be	e Cave	ĺ	•		
		<u> </u>			· · · · · · · · · · · · · · · · · · ·
It contributor is	s a child, law firm of parent(s) (if any)			•	

The Instruction	ON GUIDE explains how to complete this form.			1 PAGE # Schedule: 18/	/29 Report: 20/34	
2 FILER NAME	Goodwin, Melissa (Mrs.)				Ethics Commission filers)	
	()			00062281	,	
	TE = 11 - 12 - 12 - 12 - 12 - 12 - 12 - 12				Lo distribution and	
4 Date	5 Full name of contributor out-of-state PAC (ID#	F)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	O'Connell, Doug (Mr.)			, , ,	, , , ,	
08/05/2008				\$100.00		
	6 Contributor address; City; State; Zip Code 6603 Mesa Dr.					
	Austin, TX 78731					
				(If travel outside of	Texas, complete Schedule T)	
9 Contributor's r	Drincipal occupation	10	Contributor's job	<u> </u>		
Attorney	or scipal occupation	10	Judge Advocat			
					e e	
	employer / law firm	12	Law firm of contr	ributor's spouse (if ar	ny)	
U.S. Army						
40 15 17 1						
13 if contributor is	s a child, law firm of parent(s) (if any)					
•						
Date	Full name of contributor	ŧ)	Amount of	In-kind contribution	
2	Olavson, Viktor			contribution (\$)	description (if applicable)	
					1	
09/17/2008	Contributor address; City; State; Zip Code			\$50.00	! 	
	804 Rio Grande				1	
	Austin, TX 78701				I	
				(If travel outside of	Texas, complete Schedule T)	
•	principal occupation		Contributor's job	title		
attorney			attorney			
Contributor's e	employer / law firm		Law firm of contr	ributor's spouse (if ar		
Olavson & O	· ·		Law IIIII Or Cona	inibutor 5 species (in arry)		
If contributor is	s a child, law firm of parent(s) (if any)					
				<u>,</u>		
Date	Full name of contributor	<u></u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	O'Leary, Louri			OON (Ψ)	decomplian (ii applicable)	
09/17/2008				\$50.00	1	
09/17/2000	Contributor address; City; State; Zip Code			\$50.00		
	1300 Ruth Avenue Austin, TX 78757				l	
				<u></u>	Texas, complete Schedule T)	
•	rincipal occupation		Contributor's job	title		
Attorney	•		Attorney		•	
Contributor's e	employer / law firm		Law firm of contr	ributor's spouse (if ar	nv)	
State of Texa	· · ·			z.z. z oposoo (n ai	· · ·	
If contributor is	a child, law firm of parent(s) (if any)					

The Instruction	ON GUIDE explains how to complete this form.			1 PAGE#		
THE INCIRCOR	M Golde explains now to complete this form.			Schedule: 19/	/29 Report: 21/34	
2 FILER NAME	Goodwin, Melissa (Mrs.)			3 ACCOUNT# ((Ethics Commission filers)	
				00062281		
4 Date	5 Full name of contributor out-of-state PAC (ID# Overbay, Megan	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
09/17/2008	6 Contributor address; City; State; Zip Code 1715 E. 7th st.			\$100.00	 	
	Austin, TX 78701			(If travel outside of	Texas, complete Schedule T)	
9 Contributor's p Assistant	principal occupation	10	Contributor's job Assistant	title		
11 Contributor's e Blackburn Va	employer / law firm argas	12	Law firm of contr	ributor's spouse (if a	ny)	
13 If contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
09/08/2008	Contributor address; City; State; Zip Code 2805 Summit Heights Ct. Pflugerville, TX 78660			\$100.00	<u> </u>	
				(if travel outside of	Texas, complete Schedule T)	
Contributor's p Engineer	orincipal occupation		Contributor's job Engineer	title		
Contributor's e S.A.P.	employer / law firm		Law firm of contributor's spouse (if any)			
If contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
09/08/2008	Contributor address; City; State; Zip Code 803 Bouldin Ave. Austin, TX 78704			\$250.00	1 	
	Adolii, 17,70704			(If travel outside of	Texas, complete Schedule T)	
Contributor's p retired	principal occupation		Contributor's job n/a	title		
Contributor's e n/a	employer / law firm		Law firm of contr	ributor's spouse (if ar	ny)	
If contributor is	s a child, law firm of parent(s) (if any)					

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The Instruction	ON GUIDE explains how to complete this form.			1 PAGE#	
THE INSTRUCTION	on Guide explains flow to complete this form.			Schedule: 20.	/29 Report: 22/34
2 FILER NAME	Goodwin, Melissa (Mrs.)			3 ACCOUNT#	(Ethics Commission filers)
				00062281	
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/19/2008	6 Contributor address; City; State; Zip Code 1012 Rio Grande Austin, TX 78701			\$500.00	
				(If travel outside of	Texas, complete Schedule T)
9 Contributor's p Attorney	principal occupation	10	Contributor's job Attorney	title	
11 Contributor's e Self	employer / law firm	12	Law firm of contr	ributor's spouse (if a	ny)
13 If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	<i>‡</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/08/2008	Contributor address; City; State; Zip Code 1 Autumn Oaks Pl. Austin, TX 78738			\$50.00	
				(If travel outside of	Texas, complete Schedule T)
Contributor's p	rincipal occupation		Contributor's job n/a	title	
Contributor's e	employer / law firm		Law firm of conti	ributor's spouse (if a	ny)
If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/17/2008	Contributor address; City; State; Zip Code 5004 Crystal Water Dr. Austin, TX 78735			\$50.00	
	•			(If travel outside of	Texas, complete Schedule T)
Contributor's pretired	rincipal occupation		Contributor's job none	title	
Contributor's e none	mployer / law firm		Law firm of conti	ributor's spouse (if a	ny)
If contributor is	s a child, law firm of parent(s) (if any)				

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The Instructi	ON GUIDE explains how to complete this form.			1 PAGE#	
				Schedule: 21/29 Report: 23/34	
2 FILER NAME	Goodwin, Melissa (Mrs.)			3 ACCOUNT # (Ethics Commission filers)	
				00062281	
4 Date	5 Full name of contributor	#)	7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)	
ĺ	Rathcke, Henry & Debbie			description (ii applicable)	
09/11/2008	6 Outline address City State 75 Odds			\$50.00	
	6 Contributor address; City; State; Zip Code 9110 Sedgemoor Tr., #B				
	Austin, TX 78748				
				(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation 10 Contributor's job		title			
Electrician			Electrician		
11 Contributor's	employer / law firm	12	Law firm of contr	ributor's spouse (if any)	
HRC Air					
12 If contributor i	a a abild low firm of parent(a) (if any)	<u> </u>			
13 II contributor i	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	#)	Amount of I In-kind contribution contribution (\$) , description (if applicable)	
	Sampson, Margie			contribution (\$) description (if applicable)	
09/25/2008				\$1,000.00	
1	Contributor address; City; State; Zip Code 507 West 10th St.				
	Austin, TX 78701			1	
				(If travel outside of Texas, complete Schedule T)	
	principal occupation		Contributor's job	title	
Attorney			Attorney		
Contributor's	employer / law firm		Law firm of contributor's spouse (if any)		
Self					
If contributor i	s a child, law firm of parent(s) (if any)	<u> </u>			
ii commoder :	o a crima, law initi or parcin(c) (ii arry)				
Date	Full name of contributor	#)	Amount of In-kind contribution contribution (\$) description (if applicable)	
	Sandal, Jill			costinuon (ii applicable)	
09/10/2008	Contributor address; City; State; Zip Code			\$50.00	
	Contributor address; City; State; Zip Code 13504 Coleto Creek Trail		:		
	Austin, TX 78732			l l	
				(If travel outside of Texas, complete Schedule T)	
	principal occupation		Contributor's job	title	
n/a			.n/a		
Contributor's	employer / law firm	<u> </u>	Law firm of contr	ributor's spouse (if any)	
Homemaker					
If contributor i	s a child, law firm of parent(s) (if any)	<u> </u>			
ii contributor i	s a clind, law hill of parent(s) (if any)				

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The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#			
			Schedule: 22	/29 Report: 24/34		
2 FILER NAME	Goodwin, Melissa (Mrs.)		3 ACCOUNT# ((Ethics Commission filers)		
	(00062281			
4 Date	5 Full name of contributor ut-of-state PAC (ID#	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
6 Contributor address; City; State; Zip Code 2011 Iverness Dr. Round Rock, TX 78681		\$250.00	 			
			(If travel outside of	Texas, complete Schedule T)		
9 Contributor's p Attorney			o title			
11 Contributor's employer / law firm Self 12 Law firm of cor			ributor's spouse (if a	ny)		
13 If contributor is a child, law firm of parent(s) (if any)						
Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
09/17/2008 Contributor address; City; State; Zip Code 555 E. 5th St., Suite 3006 Austin, TX 78701		\$100.00 				
			(If travel outside of Texas, complete Schedule T)			
Contributor's p	rincipal occupation	Contributor's job retired	o title			
Contributor's e none	employer / law firm	Law firm of contributor's spouse (if any)				
If contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
09/17/2008	Contributor address; City; State; Zip Code P.O. Box 92617 Austin, TX 78709-2617		\$50.00	1 		
			(If travel outside of	Texas, complete Schedule T)		
Contributor's p	rincipal occupation	Contributor's job n/a	title			
Contributor's e retired	mployer / law firm	Law firm of contributor's spouse (if any)				
If contributor is	a child, law firm of parent(s) (if any)					

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The Instruction	ON GUIDE explains how to complete this form.		,	1 PAGE#	/20 Papart: 25/24
0 50 50 14115	0			† — — — — — — — — — — — — — — — — — — —	/29 Report: 25/34
2 FILER NAME	Goodwin, Melissa (Mrs.)			3 ACCOUNT# ((Ethics Commission filers)
				00062281	
4 Date	5 Full name of contributor out-of-state PAC (ID#	‡)	7 Amount of	8 In-kind contribution
	Tepper, Carl	-		contribution (\$)	description (if applicable)
					1
09/17/2008	6 Contributor address; City; State; Zip Code			\$100.00	1
	6 Contributor address; City; State; Zip Code 3205 Skylark Dr.				1
	Austin, TX 78757			Į	1
				(If travel outside of	Texas, complete Schedule T)
	principal occupation	10	Contributor's job	title	
investments			investments		
		<u> </u>			
	employer / law firm	12	Law firm of contr	ributor's spouse (if ar	ny)
self		l			
		<u> </u>			
13 If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	<u> </u>)	Amount of	In-kind contribution
	Tepper, Carl			contribution (\$)	description (if applicable)
					Parking for event
09/17/2008	Contributes address. City State: 7in Code			\$300.00	 -
	Contributor address; City; State; Zip Code 3205 Skylark Dr.				l
	Austin, TX 78757				1
	7,00, 7,7,7,0.0.			ļ	- · · · · · · · · · · · · · · · · · · ·
				(If travel outside or	Texas, complete Schedule T)
•	principal occupation		Contributor's job	title	
investments			investments		
		<u> </u>			·
	employer / law firm		Law firm of contributor's spouse (if any)		
self					
If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor 🔲 out-of-state PAC (ID#	<u>‡</u>)	Amount of	In-kind contribution
	Thomas, Bill (Mr.)			contribution (\$)	description (if applicable)
					i '
09/09/2008	Contributor address; City; State; Zip Code			\$500.00	1
	25616 Kahala Sunsent Ct.				!
	Spicewood, TX 78669				1
	,		l		
				(If travel outside of	Texas, complete Schedule T)
Contributor's p	principal occupation	İ	Contributor's job	title	
Investor			Investor		
	employer / law firm	ĺ	Law firm of contr	ributor's spouse (if ar	ny)
Self		ĺ			
				<u> </u>	
If contributor is	s a child, law firm of parent(s) (if any)				
	•				

OTTIER	THAN FLEDGES ON LOAD	143 (30010	IAL)			
The Instruction	אס Guide explains how to complete this form.	,	1 PAGE # . Schedule: 24/29 Report: 26/34			
2 FILER NAME	Goodwin, Melissa (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00062281			
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Troeltzsch, Lloyd & Dorothy	<u> </u>	7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)			
09/17/2008	6 Contributor address; City; State; Zip Code 8 Sparrowglen Lane Austin, TX 78738		\$50.00			
9 Contributor's p	principal occupation	10 Contributor's job none				
11 Contributor's e retired	employer / law firm	12 Law firm of cont	ributor's spouse (if any)			
13 If contributor is a child, law firm of parent(s) (if any)						
Date	Full name of contributor	<u> </u>	Amount of In-kind contribution contribution (\$) description (if applicable)			
09/10/2008	Contributor address; City; State; Zip Code 700 E. 11th St., Suite 103 Austin, TX 78701		\$100.00			
Contributor's p Attorney	vincipal occupation	Contributor's job Attorney	<u> </u>			
Contributor's e Self	mployer / law firm	Law firm of contributor's spouse (if any)				
If contributor is	a child, law firm of parent(s) (if any)					
Date	Full name of contributor	<u> </u>	Amount of In-kind contribution contribution (\$) description (if applicable) Postage			
09/03/2008	Contributor address; City; State; Zip Code 3000 S. IH35, Suite 225 Austin, TX 78704	,	\$210.00			
Contributor's p Attorney	rincipal occupation	Contributor's job Attorney	o title			
Contributor's e Sam Turner,	mployer / law firm PLLC	Law firm of cont	ributor's spouse (if any)			
If contributor is	a child, law firm of parent(s) (if any)					

	The Instruction	N GUIDE explains how to complete this form.			1 PAGE#		
						29 Report: 27/34	
2	FILER NAME	Goodwin, Melissa (Mrs.)			3 ACCOUNT# (Ethics Commission filers)	
					00062281		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Vann, Bob & Becky	<i></i>	_)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	07/16/2008				\$100.00		
	07/10/2008	Contributor address; City; State; Zip Code		\$100.00	1		
		800 Sykes Ct. Pflugerville, TX 78660				l	
		inageromo, rocygood			ĺ "		
					L. <u></u>	Texas, complete Schedule T)	
9	Contributor's p Constable	principal occupation	10	Contributor's job Constable	title		
11	Contributor's e	employer / law firm	12	Law firm of conti	ributor's spouse (if ar	ny)	
	Constable, P	ct. 2, Travis County					
12	lf contributor is	a abild law firm of narrat/a) (if any)					
13 If contributor is a child, law firm of parent(s) (if any)							
	Date	Full name of contributor 🔲 out-of-state PAC (ID#	ŧ)	Amount of	In-kind contribution	
		Vasquez-Bode, Amber			contribution (\$)	description (if applicable)	
						1	
	09/17/2008	Contributor address; City; State; Zip Code			\$250.00		
		1004 West Ave.					
		Austin, TX 78701				1	
					(If travel outside of	Texas, complete Schedule T)	
	Contributor's p	rincipal occupation		Contributor's job	title		
	Attorney			Attorney		•	
		mployer / law firm		Law firm of contributor's spouse (if any)			
	Vasquez Lav	V FIIII					
	If contributor is	a child, law firm of parent(s) (if any)					
				nt 12:77"			
	Date	Full name of contributor 🔲 out-of-state PAC (ID#	£)	Amount of	In-kind contribution	
		Vigorito, Stephen (Mr.)			contribution (\$)	description (if applicable)	
						1	
	08/18/2008	Contributor address; City; State; Zip Code			\$500.00		
		1100 E. Alcove #803				' 	
		Hutto, TX 77511					
					(If travel outside of	Texas, complete Schedule T)	
	Contributor's p	rincipal occupation		Contributor's job	title		
	Investor			Investor		•	
					·		
Contributor's employer / law firm			Law firm of conti	ributor's spouse (if a	ny)		
	Self	•					
	If contributor is	a child, law firm of parent(s) (if any)					
	contributor is	or ormo, law mini or parently) (ii any)					
						•	

SCHEDULE A (J)

1-800-325-8506

OTTLE	THAN PLEDGES ON LOA	ושטנן פוו	JIAL)		
The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 26/29 Report: 28/34		
2 FILER NAME	Goodwin, Melissa (Mrs.)		3 ACCOUNT # (Ethics Commission filers)		
			00062281		
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Walton, Gordon Jr. (Mr.)	 	7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)		
08/08/2008	6 Contributor address; City; State; Zip Code 8207 Ganttcrest Dr. Austin, TX 78749		\$50.00		
			(If travel outside of Texas, complete Schedule T)		
9 Contributor's p Manager	principal occupation	10 Contributor's j Manager	ob title		
11 Contributor's e Moby Game	• •	12 Law firm of co	ontributor's spouse (if any)		
13 If contributor is a child, law firm of parent(s) (if any)					
Date	Full name of contributor	#)	Amount of In-kind contribution contribution (\$) description (if applicable)		
09/17/2008	Contributor address; City; State; Zip Code 8207 Ganttcrest Dr. Austin, TX 78749		\$100.00 		
			(If travel outside of Texas, complete Schedule T)		
Contributor's p Manager	principal occupation	Contributor's j Manager	ob title		
Contributor's e Moby Games	employer / law firm S	Law firm of contributor's spouse (if any)			
If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	‡)	Amount of In-kind contribution contribution (\$) description (if applicable)		
09/17/2008	Contributor address; City; State; Zip Code 2510 McGregor Dr. Austin, TX 78745		\$100.00		
	Austin, 17,70740		(If travel outside of Texas, complete Schedule T)		
Contributor's pretired	rincipal occupation	Contributor's j n/a	ob title		
Contributor's e	employer / law firm	Law firm of co	ontributor's spouse (if any)		
If contributor is	s a child, law firm of parent(s) (if any)		_		

SCHEDULE A (J)

(512)463-5800

L.								
	The Instruction	ON GUIDE explains how to complete this form.			1 PAGE#			
<u> </u>		·			Schedule: 27/	/29 Report: 29/34		
2	FILER NAME	Goodwin, Melissa (Mrs.)			3 ACCOUNT # (Ethics Commission filers)			
					00062281			
4	Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	09/07/2008	6 Contributor address; City; State; Zip Code			\$50.00	 		
		1604 San Antonio Austin, TX 78701				_		
					(If travel outside of	Texas, complete Schedule T)		
9	Contributor's principal occupation Attorney 10 Contributor's job Attorney		title	title				
11	Contributor's e Self	employer / law firm	12	Law firm of contr	ributor's spouse (if ar	ny)		
13 If contributor is a child, law firm of parent(s) (if any)								
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	08/08/2008	Contributor address; City; State; Zip Code			\$500.00	 		
		Austin, TX 78759			(If travel outside of	Texas, complete Schedule T)		
	Contributor's p Psychologist	rincipal occupation		Contributor's job Psychologist	title			
	Contributor's e Self	mployer / law firm	Law firm of contributor's spouse (if any)					
ı	If contributor is	a child, law firm of parent(s) (if any)	· ·					
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/17/2008	Contributor address; City; State; Zip Code 2727 Exposition, #119 Austin, TX 78703			\$100.00	 		
	ł				(If travel outside of	Texas, complete Schedule T)		
	Contributous -	disclosit and a second second		Contributorio ich	<u> </u>	Toxas, complete ochedale 1)		
	Program des	rincipal occupation igner		Contributor's job Program desig				
	Contributor's e self	mployer / law firm		Law firm of contr	ributor's spouse (if ar	ny)		
	If contributor is	a child, law firm of parent(s) (if any)						

SCHEDULE A (J)

(512)463-5800

OTHER	THAN PLEDG	E3 OK LOAN	43	(30010	IAL)	
The Instruction	ON GUIDE explains how to com	plete this form.			1 PAGE # Schedule: 28/2	29 Report: 30/34
2 FILER NAME	Goodwin, Melissa (Mrs.)					thics Commission filers)
4 Date 09/11/2008	Yeomans, Richard (Mr.	· · · · · · · · · · · · · · · · · ·			7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
	6 Contributor address; 0 1212 Grosvener Ct. Austin, TX 78746	City; State; Zip Code			. 1	Texas, complete Schedule T)
9 Contributor's p Attorney	principal occupation			Contributor's job Attorney	title	
11 Contributor's employer / law firm Graves Dougherty 12 Law firm of contributor's employer / law firm of contributor's e			aw firm of contr	ibutor's spouse (if an	у)	
13 If contributor is	13 If contributor is a child, law firm of parent(s) (if any)					
Date	Full name of contributor Young, Cindy	out-of-state PAC (ID#_)	Amount of contribution (\$)	In-kind contribution description (if applicable) postage
09/17/2008	Contributor address; (9854 Weir Loop Cir Austin, TX 78736	City; State; Zip Code			\$42.00	
·					, (If travel outside of i	Texas, complete Schedule T)
Contributor's p	rincipal occupation			Contributor's job etired	title	
Contributor's e none	employer / law firm		Law firm of contributor's spouse (if any)			
If contributor is	a child, law firm of parent(s) (if	any)				
Date	Full name of contributor Young, Cindy	out-of-state PAC (ID#_)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/25/2008	Contributor address; 0 9854 Weir Loop Cir Austin, TX 78736	City; State; Zip Code			\$1,000.00	
	Ausiii, 12 70730				(If travel outside of 1	exas, complete Schedule T)
Contributor's p	rincipal occupation			Contributor's job etired	title	
Contributor's e	mployer / law firm		Ĺ	aw firm of contr	ibutor's spouse (if an	у)
If contributor is	a child, law firm of parent(s) (if	any)				-

Texas Ethics Commission

POLITICAL CONTRIBUTIONS

The Instructi	ON GUIDE explains how to complete this form.	The Instruction Guide explains how to complete this form.	
FILER NAME	Goodwin, Melissa (Mrs.)		Schedule: 29/29 Report: 31/34 3 ACCOUNT # (Ethics Commission filers) 00062281
Date	Date 5 Full name of contributor		7 Amount of 8 in-kind contribution contribution (\$) description (if applicable
08/29/2008	6 Contributor address; City; State; Zip Code 402 Prize Oak Cedar Park, TX 78613		\$100.00
Contributor's Maintenence	principal occupation	10 Contributor's Maintenac	
Contributor's Leander ISE	employer / law firm	12 Law firm of	contributor's spouse (if any)
If contributor i	s a child, law firm of parent(s) (if any)		
<u> </u>			
			,

POLITICAL EXPENDITURES

P.O.Box 12070

SCHEDULE F

The Instructi	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/2	2 Report: 32/34	
2 FILER NAME	Goodwin, Melissa (Mrs.)		3 ACCOUNT# 00062281	(Ethics Commission filers)	
4 Date	5 Payee name AM Productions			7 Amount (\$)	
07/02/2008 6 Payee address; City; State; Zip Code 7202 Smokey Hill Rd. Austin, TX 78736				\$4,723.92	
8 Purpose of pa required.) Signs	yment (See instructions regarding type of information	9 · · Complete if direct expenditure to benefit Candidate/Officeholder · · Candidate / Officeholder name:			
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:			
Date	Payee name AM Productions			Amount (\$)	
07/03/2008 Payee address; City; State; Zip Code 7202 Smokey Hill Rd. Austin, TX 78736				\$575.89	
required.)	/ment (See instructions regarding type of information	Complete if direct expenditure to benefit Candidate/Officeholder Candidate / Officeholder name:			
	Imper stickers, banners f travel outside of Texas, complete Schedule T)	Office sought: Office held:			
Date	Payee name			Amount	
	FedEx Kinkos,			(\$)	
08/29/2008	Payee address; City; State; Zip Code 5601 Brodie Ln Ste 1210 Austin, TX 78745			\$156.55	
Purpose of pay required.) Paper supplies	ment (See instructions regarding type of information	** Complete if direc Candidate / Officehol		efit Candidate/Officeholder **	
(I	f travel outside of Texas, complete Schedule T)	Office sought: Office held:			
Date	Payee name FedEx Kinkos,			Amount (\$)	
08/30/2008	Payee address; City; State; Zip Code 3300 Bee Caves Rd., Suite 715 Austin, TX 78746	· · · · · · · · · · · · · · · · · · ·		\$184.17	
Purpose of pay required.) paper & printing	ment (See instructions regarding type of information	** Complete if direc Candidate / Officehol		efit Candidate/Officeholder	
	f travel outside of Texas, complete Schedule T)	Office sought: Office held:			

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506 POLITICAL EXPENDITURES SCHEDULE F 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 2/2 Report: 33/34 (Ethics Commission filers) 2 FILER NAME Goodwin, Melissa (Mrs.) 3 ACCOUNT# 00062281 Date Amount Payee name (\$) Whole Foods Market 09/18/2008 \$1,691.21 6 Payee address; City; State; Zip Code 525 N. Lamar Blvd. Austin, TX 78703 Purpose of payment (See instructions regarding type of information 9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** required.) Candidate / Officeholder name: Food. Office sought: (If travel outside of Texas, complete Schedule T) Office held:

Texas Ethics Cor	nmission P.O.Box 12070 Austin, Texas 78711-2070	(512)463	3-5800	1-800-325-8506
	CAL EXPENDITURES FROM PERSONAL FUNDS		sc	HEDULE G
The Instruction	ON GUIDE explains how to complete this form.	1 PAGE# Schedule: 1/1	Report:	34/34
2 FILER NAME	Goodwin, Melissa (Mrs.)	3 ACCOUNT# 00062281	(Ethics Co	ommission filers)
4 Date	5 Payee name Par Golf		8	Amount (\$)
07/02/2008	6 Payee address; City; State; Zip Code 550 Pratt Ave. Schaumburg, IL 60193		 - -	\$301.64
	7 Purpose of expenditure (See instructions regarding type of information req. Golf Tees (If travel outside of Texas, complete Schedule T)	uired.)	Re fro	oimbursement m political ntributions ended
			<u></u>	
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